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CONFIRMATION NO. 5843

Bib Data Sheet

SERIAL NUMBER 10/711,844	FILING OR 371(c) DATE 10/08/2004 RULE	CLASS 257	GROUP ART UNIT 2826	ATTORNEY DOCKET NO. BUR920040173US1
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APPLICANTS

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**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 11/04/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY VT	SHEETS DRAWING 5	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Initials P6			
Verified and Acknowledged	Examiner's Signature				

ADDRESS

46170

TITLE

INTEGRATED CIRCUIT WITH BULK AND SOI DEVICES CONNECTED WITH AN EPITAXIAL REGION

FILING FEE RECEIVED 790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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